# Summer Golf Program It's not just about golf, it's about life!

**Who:** Ages 9 - 17

Learn integrity, sportsmanship, respect, confidence, honesty, responsibility, perseverance, courtesy and good judgment through the game of golf\*

Cleveland First Tee Golf
Course at Washington Park, East 49th & Fleet

**When:** June 22 - August 13, 2010

**Tuesdays & Thursdays** 

9:30 - 11:00 a.m. or 1:30 - 3:00 pm

Wednesdays & Fridays

10:30 a.m. - 12:00 p.m. or 1:30 - 3:00 p.m.

# How:

## Registration

Complete and return the form on the back of this flyer to any City of Cleveland Recreation Center by June 18th. Space is limited!

## **Transportation**

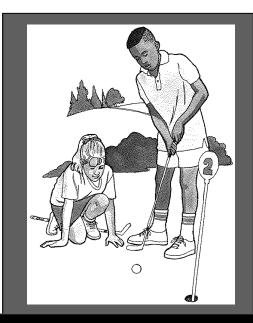
Transportation to and from Washington Park provided at the following locations:

 Gunning Park
 16700 Puritas
 420-7900

 Kennedy
 17300 Harvard
 664-2572

 Estabrook
 4125 Fulton
 664-4149

 Zelma George
 3155 M.L.K.
 420-8800



Positively impacting the lives of children by providing educational programs and learning facilities that promote strong character development and life enhancing values through the game of golf.



<sup>\*</sup>Life skills is an important part of this program. Children may not golf every day.



**City of Cleveland**Department of Parks, Recreation & Properties

Division of Recreation 601 Lakeside Avenue, Room 8 Cleveland, Ohio 44114-1090 216/664-2570 \*Fax: 664-4675

### **DIVISION OF RECREATION WAIVER GRANTING PERMISSION TO PARTICIPATION**

Name of participant	<u>Junior Golf</u> Recreation Program		
Washington Park Golf Course			
Location of Event	Pick up time	Drop off time	
I hereby acknowledge that there are ri ward and agree to assume all risks and arising out of the participation of my concluding transportation to and from the In consideration for the City of lease, indemnify and hold harmless, on heirs, representatives, administrators, employees, agents and representatives	isks and hazards of personal injudication of p	the City of Cleveland's Recreation Program. Sonal injury (including death) to my child or tury (including death) and property damage, cipating in the above Recreational Program, above described program, I do hereby repouse, my child or ward, and our respective dassigns, the City of Cleveland, its officers, cost, expenses, damages, and liabilities for my child or ward while participating in this	
Signature of Parent / Legal Guardian			
Emergency Phone #		Name of Emergency Contact and Relationship	
Name of Center or Facility	<u> </u>		
	this program, you must att guardianship papers to this	tach a copy of your child's birth certificate or form.	
Name	Addr	ess	
Phone	Birth	Birth date	
MaleFemale	Left handed	Right handed	
Yes, I need equipment	No, I	have my own equipment	
Pick up site:			